

MORRISON & FOERSTER LLP

Attorneys at Law
425 Market Street
San Francisco, California 94105-2482
Telephone: (415) 268-6237
Facsimile: (415) 268-7522

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LILIA OLSEN

Atty Docket No: 500862001400

Application Serial No.: 09/657,431

Filed: September 7, 2000

Inventors: Dominique P. BRIDON et al.

Examiner: B. Chism

Group Art Unit: 1654

Title: LONG LASTING ANTI-ANGIOGENIC PEPTIDES

ATTACHMENTS:

- 1) Transmittal - 1 pg
- 2) Response to Office Action of May 27, 2004 - 3 pgs
- 3) Interview Summary - 1 pg

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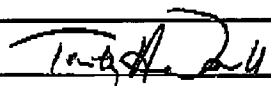
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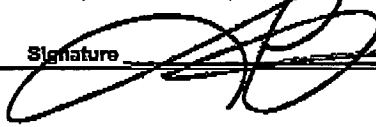
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/657,431
		Filing Date	September 7, 2000
		First Named Inventor	Dominique P. BRIDON
		Group Art Unit	1654
		Examiner Name	B. Chism
Total Number of Pages in This Submission	5	Attorney Docket Number	500862001400

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply to OA of 9/27/04 - 3 pgs <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter - 1 pg <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) 1. Interview Summary - 1 pg Fax Cover Sheet
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual Name	Timothy A. Worrall (Reg. No. 54,552) MORRISON & FOERSTER LLP	CUSTOMER 20872
Signature		
Date	August 25, 2004	

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